

THE POLICY IMPLICATIONS OF HOMELESSNESS

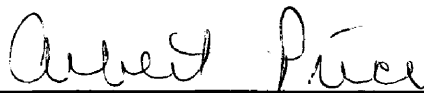
by

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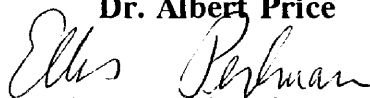
November 25, 1996

First Reader



Dr. Albert Price

Second Reader



Dr. Ellis Perlman

Literature Review

A brief history of the homeless crisis is needed to better understand the magnitude of the problem. When searching for articles and information about the homeless in various indexes prior to 1980, one is referred to articles about hobos, vagrants, refugees, derelicts and bag ladies, but never the homeless. Norweeta Milburn and Roderick Watts note, "...homelessness, as a 'social problem' is not a new phenomenon--it has been around for some time. But its relative importance and how it is defined in terms of 'who' makes up the homeless population tend to change over time."¹

In early 1987, following intense lobbying from a number of advocacy groups and individuals representing homeless people, in particular Mitch Snyder and the Community for Creative Non-Violence (CCNV), House Speaker Jim Wright ordered up Resolution 109 in the House of Representatives on March 5.² This action followed a series of public hearings, including a formal hearing held by the House of Representatives, Subcommittee on Housing and Community Development, on February 4, 1987. Although the bill to provide emergency relief for the homeless was formally introduced in 1987, national attention to the issue actually began in 1982 with the first Congressional hearings on homelessness since the depression. One of the early field hearings took place in Mitch Snyder's Washington shelter in 1984.³ The actual bill, H.R. 588, was sponsored by members of both parties and was titled "Urgent Relief for the Homeless." It was designed to "provide urgently needed assistance to protect and improve the lives and safety of the homeless, with special emphases on families and children".⁴

¹Norweeta G. Milburn & Roderick J. Watts, "Methodological Issues in Research on the Homeless and the Homeless Mentally Ill," *International Journal of Mental Health*, Vol. 14, No. 4, page 43.

²*Congressional Record*, Vol. 133, No. 34, Thursday, March 5, 1987, page H1007.

³*Urgent Relief for the Homeless Act, Hearing before the Subcommittee on Housing and Community Development of the Committee on Banking, Finance and Urban Affairs, House of Representatives, One-Hundredth Congress, First Session*, H.R. 558, February 4, 1987, page 2.

⁴*Congressional Record*, Vol. 133, No. 34, Thursday, March 5, 1987, page H996.

As introduced, the bill provided \$500 million for federal aid for a variety of programs. The funds were to be allocated in the following ways⁵:

- \$100 million for Section 8 rental housing subsidies targeted solely for homeless families;
- \$75 million for a new grant program to meet both the physical and mental health needs of the homeless;
- \$75 million for a new grant program to convert surplus government property into facilities for the homeless;
- \$50 million for the Community Services Block Grant Program for services for the homeless;
- \$30 million for HUD's Transitional Housing Demonstration Program;
- \$25 million for the National Institute of Mental Health Community Support Program to fund services for mentally ill homeless persons;
- \$25 million for construction of permanent housing for handicapped homeless persons;
- \$20 million for the Federal Emergency Management Agency's Emergency Food and Shelter Program.

The bill also established an Inter-Agency Office on Homelessness within the Department of Health and Human Services. One of the responsibilities of this new coordinating agency would be to identify underutilized federal, state and local government buildings which could be used in various capacities as facilities to help the homeless. This issue was of particular concern to the Coalition for Creative Nonviolence since, under its leadership, 1,000 people were then occupying a vacant 185,000 square foot government building (once home to Washington's Federal City College).⁶

The ability to use vacant government properties for the homeless was a significant victory for Mitch Snyder. In 1985, he had staged a hunger strike in the nation's capitol to draw attention to the plight of the homeless. Announcing that "people's lives are at stake," Snyder told the press that he would starve himself to death unless the Reagan

⁵*Congressional Record*, Vol. 133, No. 34, Thursday, March 5, 1987, page H1028.

⁶*Urgent Relief for the Homeless Act, Hearing before the Subcommittee on Housing and Community Development of the Committee on Banking, Finance and Urban Affairs, House of Representatives, One-Hundredth Congress, First Session, H.R. 558, February 4, 1987, page 31.*

administration agreed to appropriate \$5 million to repair the shelter run by his organization.⁷ Although an agreement was finally reached (due in part to the intervention of Susan Baker, former Secretary of State James Baker's wife), within months the accord fell apart and Snyder went on two more fasts to demand attention. Finally, nearly a year later, the White House and Congress stepped in and provided the needed funds.⁸

The bill authorized categorical grants to public and private organizations which provide support services to the homeless.⁹ The bill directed states and local governments to take a leadership role in working with the local non-profit organizations, including religious and non-profit groups and community action agencies, in addressing the problems and causes of homelessness.¹⁰

The bill enjoyed strong bipartisan support. The major sponsors included Representatives Stewart McKinney, Bruce Vento, Chalmers Wylie, Henry Gonzalez (Chairman of the Subcommittee on Housing and Community Development), Fernand St. Germain, and Mike Lowery. The bill was also supported by the United Way, the Salvation Army, the National Council of Jewish Federations, the American Red Cross, the National Conference of Catholic Charities, the National Council of Churches, the National Mental Health Association, the Association for Retarded Citizens, United Cerebral Palsy and the Easter Seal Society.

In comments on the House floor and during the public hearings, speakers pointed out that one of the primary reasons for the homeless crisis was the reduction of the federal housing budget by 70% between 1981 and 1987,¹¹ from \$31.9 million to \$9.4 million.¹² In his comments on the House floor, Representative Gonzalez stated that the total number of

⁷Jennet Conant with Nikki Finke Greenberg, "'Holiday Inn' for the Homeless?", *Newsweek*, July 8, 1985, page 44.

⁸Michael Doan, "Mitch Snyder, Washington's Hero of the Homeless," *U.S. News and World Report*, June 16, 1986, page 11.

⁹*Congressional Record*, Vol. 133, No. 34, Thursday, March 5, 1987, page H997.

¹⁰*Congressional Record*, Vol. 133, No. 34, Thursday, March 5, 1987, page H998.

¹¹*Congressional Record*, Vol. 133, No. 34, Thursday, March 5, 1987, page H1003.

¹²*Congressional Record*, Vol. 133, No. 34, Thursday, March 5, 1987, page H1029.

families helped through federal housing programs between 1980 and fiscal year 1988 was 1,633,000 and that, if the amount of funding for subsidized housing projects had not been cut, an additional 1,227,000 would have received assistance, inferring that at least some of these individuals were now homeless.¹³ During public hearings Mayor James Roark of Charleston, West Virginia, representing the National League of Cities, pointed out how other unrelated federal initiatives contributed to the crisis and stated:

"Trends in urban development, redevelopment, private housing markets, coupled with reductions in government spending, have served to diminish the number of low-income family units, the supply of single-room occupancy dwellings (SROs) and the availability of congregate residences for mentally-handicapped persons."¹⁴

The Coalition for Creative Non-Violence received an extraordinary amount of national press coverage for seven weeks while their members held a twenty-four hour vigil on the grounds of the Capitol in support of the bill. During this demonstration, members of the Coalition and other well-known individuals, including elected officials and Hollywood celebrities, slept outside to help draw attention to the plight of homeless people.¹⁵ During their remarks to Congress, Representatives McKinney and Fauntroy described their experiences of spending a night outside and how this experience helped convince them of the urgent need to address the problems with which homeless people are confronted.

Another issue discussed on the floor was how the impact of the federally-mandated deinstitutionalization process has created new crises in local communities. The release process, initiated in 1974, stipulated that mental health treatment had to be provided in the least restrictive environment. As a result, large numbers of patients were, and continue to be, released from long-term hospitalization to community-based residential settings. Federal guidelines directed states to place mental patients back into the communities from which they originated and to establish foster care homes in residential settings. Twenty years ago,

¹³*Congressional Record*, Vol. 133, No. 34, Thursday, March 5, 1987, page H1002.

¹⁴*Urgent Relief for the Homeless Act, Hearing before the Subcommittee on Housing and Community Development of the Committee on Banking, Finance and Urban Affairs, House of Representatives, One-Hundredth Congress, First Session, H.R. 558, February 4, 1987, page 62.*

¹⁵*Congressional Record*, Vol. 133, No. 34, Thursday, March 5, 1987, page H1007.

almost half a million patients were in state mental hospitals. Three-quarters of those patients are now living elsewhere.¹⁶

The deinstitutionalization process is now viewed as a two-edged sword. Deinstitutionalized people, many of whom grew up in hospital settings, are now enjoying their freedom, sometimes for the first time in their lives. On the other hand, an appropriate level of funding for community-based treatment and support services did not accompany the release process, thus creating a burden for the local communities confronted with a dramatic increase in the number of mentally ill residents. The result of this process has been the dramatic increase of people with severe mental health problems residing in urban areas who, without adequate support services, are often unsuccessful in making the transition from institutionalization to community living. Tragically, many of these people are often found aimlessly wandering the streets. In a 1985 Time editorial, a mental patient's advocate concludes:

"In many places it [the release process] is worse than in the Middle Ages, when at least some communities cared for their mentally disabled and did not ostracize them."¹⁷

Another issue addressed during the introduction of the bill was the dilemma of creating a new entitlement program, particularly in light of the budget deficit. Representative Wortley urged the Congress to pass this bill, but only through securing of funds for the bill from other existing, but "less worthy" federal programs.¹⁸ (This idea was not accompanied by any suggestions of which other "less worthy" programs might be reduced.)

An issue debated that would continue to draw heated arguments was the actual number of homeless people there really were. Wortley pointed out that estimates ranged from 250,000 to 3 million.¹⁹ In addition, the issue of how to best help the homeless, whose membership represents an extremely wide range of social and psychological problems, was debated. A

¹⁶Essay: "When Liberty Really Means Neglect," *Time*, December 2, 1985, page 103.

¹⁷Essay: "When Liberty Really Means Neglect," *Time*, December 2, 1985, page 103.

¹⁸*Congressional Record*, Vol. 133, No. 34, Thursday, March 5, 1987, page H1004.

¹⁹*Congressional Record*, Vol. 133, No. 34, Thursday, March 5, 1987, page H1003.

report by the American Psychiatric Association was cited, which indicated that nearly 40% of the homeless are chronically and severely mentally impaired and therefore need more than emergency housing to stabilize their lives.²⁰ Other research, including a study by Dr. Irwin-Perr of the Rutgers Medical School, indicates that of the homeless mentally ill:

"...nearly 35% have schizophrenia and 10% significant clinical depression...and some 25% to 50% have alcohol and drug-abuse problems, which means that, to be conservative, a majority of the homeless dwell near either psychosis or stupor."²¹

Representative Crane spoke in opposition to the bill, his primary concerns being the creation of a new categorical grant program, the cost of the bill, the logistical problems of using surplus government buildings for the homeless and the lack of specificity of who a homeless person really is (an issue that is still being debated even today). He pointed out that the definition of a homeless person was so vague that, under the current definition, "some Congressional aides might qualify for assistance." The definition of a homeless person was:

"...an individual who lacks a fixed, regular, and adequate night-time residence; and an individual who has a primary night-time residence that is a supervised or privately operated shelter (including a welfare hotel or congregate shelter) designed to provide temporary living accommodations; an institution that provides a temporary residence for individuals intended to be institutionalized; a temporary accommodation in the residence of another individual; or a public or private place not designed for, or ordinarily used, as a regular sleeping accommodation for human beings."²²

Crane was also one of the few people to publicly question the influence that Mitch Snyder had in the development of the bill. Snyder's life was complicated and full of opposing values. Prior to his involvement with CCNV, he left his wife and children and, in search of a purpose for his life, was arrested for driving a vehicle that he had rented with a stolen credit card. Upon his conviction he was sent to Danbury Prison, where he met Philip and Daniel Berrigan. The experience of studying and working with the Berrigans while at

²⁰*Congressional Record*, Vol. 133, No. 34, Thursday, March 5, 1987, pages H1003-1004.

²¹Essay: "When Liberty Really Means Neglect," *Time*, December 2, 1985, page 103.

²²*Congressional Record*, Vol. 133, No. 58, Wednesday, April 8, 1987, page S4889.

Danbury provided the direction that Snyder had been searching for and, following his release from prison, he immersed himself in the Community for Creative Non-Violence.

In 1975, the CCNV had developed a plan in which he became totally involved: the identification of abandoned buildings to use as emergency shelters for the homeless. When the federal government refused to cooperate, Snyder would lead groups of CCNV members to the building, rip down the boards on the doors, and occupy it until the police arrested them and put the building under surveillance. This technique, as well as the hunger strikes, celebrity involvement and unrelenting confrontations with the government, drew an increasing amount of national media attention.²³ His charisma and popularity continued to grow and at times sent conflicting messages to the public and caused some unrest and ill-will among Washington's other organizations and churches who worked with the homeless. Under Snyder's leadership, CCNV became increasingly militant, unyielding, but effective in getting its message out. The homeless relief bill is just one example of the victories that this organization celebrated; at times overwhelming other more effective, but smaller, organizations.

In his remarks concerning Snyder, Representative Crane questioned the expense of basing needs of the homeless solely on the input and involvement of the CCNV, commenting that the organization's estimate of 3 million homeless people in the United States could not be substantiated. This issue continued to raise concerns, even after passage of the bill, as Snyder refused to cooperate with the efforts of the United States Census Bureau in its first attempt to actually count the number of homeless people on one given day, March 26, 1990. The Census Bureau called this initiative, "S(for shelter)-Night". Snyder insisted that the government was attempting to show the number of homeless people was fewer than what he felt actually existed. Crane urged Congress not to pass the bill which "usurps local initiatives by increasing the power of the Federal Government."²⁴ Representatives Buechner and Roth also spoke in opposition, citing the difficulty in managing the funds in a proper manner and how additional funds will only make the budget deficit worse. Both

²³Peter J. Boyer, "Mitch Snyder: The Darkness Within," *Vanity Fair*, November, 1990, page 171.

²⁴*Congressional Record*, Vol. 133, No. 34, Thursday, March 5, 1987, pages H1005.

Congressmen felt that services for the homeless should be dealt with under the existing homeless relief act.²⁵

The Inter-Agency Council on the Homeless was responsible for reviewing all Federal activities and programs to assist homeless individuals, take such action as may be necessary to reduce duplication among programs and activities, monitor, evaluate and recommend improvements in programs conducted by the federal agencies, state and local governments and private organizations, and provide professional and technical assistance to organizations which provide programs and services to homeless people.²⁶ The Council was also responsible for identifying excess vacant property owned by the federal government and instituting a process that would make these structures available to the homeless or to agencies working with the homeless.

The members of the council were comprised of the:²⁷

1. Secretary of Agriculture
2. Secretary of Commerce
3. Secretary of Defense
4. Secretary of Education
5. Secretary of Energy
6. Secretary of Health and Human Services
7. Secretary of Housing and Urban Development
8. Secretary of the Interior
9. Secretary of Labor
10. Secretary of Transportation
11. Director of the ACTION Agency
12. Administrator of General Services
13. Director of the Federal Emergency Management Agency
14. Postmaster General of the United States
15. Administrator of Veterans' Affairs
16. Heads of such other Federal agencies as the Council deems appropriate

On April 8, 1990, a companion bill was introduced in the Senate by Senator Robert Dole, who briefly outlined its purpose. In remarks in the Senate hearings, Senator Edward Kennedy stated:

²⁵*Congressional Record*, Vol. 133, No. 34, Thursday, March 5, 1987, pages H1006.

²⁶*Congressional Record*, Vol. 133, No. 58, Wednesday, April 8, 1987, page S4881.

²⁷*Congressional Record*, Vol. 133, No. 58, Wednesday, April 8, 1987, page S4881.

"The Labor Committee bill provides emergency services for homeless families to reduce the misery of homelessness and it also establishes service systems that can contribute to an end to homelessness and the beginning of a decent life for important segments of this population."²⁸

On May 7, 1987, Rep. Stewart McKinney, the driving force behind the Act, died of AIDS. On May 8, 1990, following Senate approval of the companion bill, the House acted on the Senate's version by appointing certain members to a Joint Conference to resolve those issues still in question.²⁹ In addition, members of both parties of the House announced that, as part of the conference discussions, it was their hope to honor Stewart McKinney by naming the Act after him.³⁰ On June 30, 1987, the conference report, including the naming of the bill for McKinney, was passed by both the Senate and the House of Representatives, thus paving the way for President Reagan's signing of the Stewart B. McKinney Homeless Assistance Act (Public Law 100-77) on July 22, 1987. The conference report authorized funds for fiscal year 1987 totaling \$442.7 million dollars and \$616 million for 1988.

Three years later, on July 3, 1990, Mitch Snyder committed suicide. While his legacy lives on through the attention and funding for which he was in great part responsible, no one person or movement has replaced his charismatic leadership. Although services for the homeless have grown more sophisticated since Snyder's death, research, strategies, innovative projects and new advocates have failed to resolve this ongoing crisis.

While Snyder was extremely effective in drawing national media attention to homeless people, other more traditional programs were quietly going about the business of assisting agencies and officials dedicated to reducing the number of homeless people in local communities. The National Alliance to End Homelessness, a 3,000 member organization founded in 1983, has become increasingly visible in drawing attention to the many different aspects of homelessness. The Coalition works with nonprofit organizations, public officials, business leaders, homeless and formerly homeless people to implement basic services--affordable housing, adequate incomes and support services. The Alliance distributes a

²⁸*Congressional Record*, Vol. 133, No. 58, Wednesday, April 8, 1987, page S4811.

²⁹*Congressional Record*, Vol. 133, No. 74, Friday, May 8, 1987, page H3349.

³⁰*Congressional Record*, Vol. 133, No. 74, Friday, May 8, 1987, page H3348.

monthly newsletter, conducts and publishes research, keeps a data bank on service providers, and is an information resource for the press, academia, corporations and other national organizations helping homeless people.³¹

Locally, the issue of homelessness gained attention. Agencies established new programs and services, including an effort by the City of Flint which established the VISTA (Volunteers In Service To America) Drop-In Center in August of 1985, to help meet the personal, educational and social needs of homeless people in the city. Although the target population was initially called "street people", most people using the Center also had serious mental health problems, and many were recently released from long-term placement in state mental institutions.

The Center is located in downtown Flint. Services include free clothing and food, personal hygiene supplies, education classes, recreation and, through large grants from the Department of Mental Health, special consumer employment and leadership opportunities. Initially, the Center was open seven days a week.

Ten years after the McKinney bill was first introduced, the number of people who are actually homeless continues to be an area open to debate. Wolch points out:

"The fact that the homeless population is notoriously fugitive compounds the problems of defining homelessness. Different definitional and enumeration strategies have produced widely varied estimates of homelessness in the United States."³²

Under the Reagan and Bush administrations, the federal government tried for the first time to officially document the number of people who were homeless. Unfortunately, all research projects, and even the Census Bureau itself, proved that this effort was an utter failure.

Estimates of the number of homeless ranged from 250,000 to 350,000 in 1984, when the Department of Housing and Urban Development first attempted to count the number of

³¹"Now is the Time..." brochure, The National Alliance to End Homelessness, issued for Combined Federal Campaign No.: 1074, 1993-94.

³²Jennifer R. Wolch, Michael Dear, and Andrea Akita. "Explaining Homelessness." *Journal of the American Planning Association*, Autumn 1988, p. 444.

homeless³³, to the number provided by the Washington-based Community for Creative Nonviolence (CCNV), which in 1978 reported that the number had grown to 3 million people.³⁴ The U. S. Conference of Mayors cited an average annual increase of 20 percent in the number of people seeking emergency shelter.³⁵

According to the City of Flint's Comprehensive Homeless Assistance Plan for Assisting the Homeless in Flint/Genesee County (CHAP), there were potentially 4,351 homeless individuals and families in Genesee County in 1988. The report also stated that 4,497 homeless people sought shelter in 1989 (based on the results of a local survey carried out by the Flint/Genesee Committee Concerned with Housing, Emergency Housing Committee).³⁶

Initially, the estimated number of homeless people in Genesee County was based on a formula developed by the Community Services Society/Institute for Social Welfare Research, a national advocacy group for the homeless in New York City. This organization estimated that one percent of the nation's population may become homeless at some time of the year. The formula was applied to the population of Genesee County, therefore resulting in the number 4,351.³⁷

Recent national efforts to actually count the homeless have met with limited success. In 1991, a Congressional Task Force announced that the effort to count the homeless as a part of the 1990 census was deemed worthless. John Connolly, a spokesman for the Census Bureau, stated that "because of the absence of an agreed-upon definition of homelessness, an accurate count of that population is impossible."³⁸

³³Robert C. Ellickson, "The Homeless Muddle," *The Public Interest*, Number 99, Spring 1990, page 52.

³⁴*Congressional Record*, Vol. 133, No. 34, Thursday, March 5, 1987, page H1003.

³⁵Wolch, et al, page 444.

³⁶Gregory L. McKenzie, "Comprehensive Homeless Assistance Plan for Assisting the Homeless in Flint/Genesee County," City of Flint Department of Community Development publication, 1988, page 1.

³⁷McKenzie, page 1.

³⁸Julio Barreto, "Census 'snapshot' of homeless finds total count out-of-focus," *Nation's Cities Weekly*, Volume 14, Number 18, May 6, 1991, page 4.

Evaluation Review published a series of reports in August 1992 concerning this unprecedented national effort. Wright and Devine note that:

"It is relatively obvious that 'the total number of homeless' is of necessity a 'soft' ambiguous number that probably cannot be known with a high degree of precision. There are, first, all the customary uncertainties inherent in the research process, the uncertainties of sampling, measurement error, and related factors. These and a range of related factors imply that no study can provide a definitive count of the size of the homeless population; the best one can hope for is a more or less plausible count with known and hopefully small uncertainties attached to it."³⁹

In addition to a review of the overall effort, a formal evaluation of the enumeration procedures was carried out in five major cities: Chicago, New York, Los Angeles, Phoenix and New Orleans, where teams of investigators were contracted by the Census Bureau to assist in assessing enumeration efforts.

The researchers point out that each of the five cities studied "encountered its own issues and problems, but four were common to all: shelter lists and definition, site selection, intentional avoidance, and Census protocol."⁴⁰

Shelter lists and definition: The Census definition of a shelter for the homeless overlooked 'quasi-shelters' and other informal overnight establishments that provide shelter for the homeless but are either not covered by the Census definition or not known about before the S-Night effort.⁴¹

Site selection: S-Night observers in all five cities were restricted to predesignated areas of the city that the Census, working with local authorities, had identified as 'high density' homeless areas, therefore enumeration was restricted to homeless persons who spent the night somewhere in these predesignated areas; street people outside those areas were not enumerated.⁴²

Intentional avoidance: A few well known advocates (i.e.: Mitch Snyder) urged a policy of noncooperation, apparently feeling that any count would be a

³⁹James D. Wright & Joel A. Devine, "Counting the Homeless: The Census Bureau's 'S-Night' in Five U.S. Cities," *Evaluation Review: A Journal of Applied Social Research*, August 1992, page 356.

⁴⁰Wright & Devine, page 362.

⁴¹Wright & Devine, page 362.

⁴²Wright & Devine, pages 362-363.

substantial undercount that would lead to an 'official' understatement of the dimensions of the problem and to further reductions in homeless programs.⁴³

Census protocol: S-Night decoys in all five cities reported numerous violations of Census protocol, including seeing some street people never approached, enumerators appearing extremely hesitant and fearful and substituting their own subjective evaluations about who looked homeless in place of actual enumeration.⁴⁴

Overall "comparison of observer reports with census returns indicates that street enumeration was not carried out in a comparable, standardized way in the five cities. The main operational problems were enumerator failure to enumerate some sites and selectivity in approaching people within sites."⁴⁵

Although flawed in many respects, "These first-time data are very important to planning researchers. The decade of the 1990s began with a new set of demographic data on the homeless. Even if controversial, this is welcome news for planning researchers."⁴⁶

In March 1992 a major report for the Department of Housing and Urban Development, Practical Methods for Counting Homeless People, was published. In the report, Martha Burt discusses the pitfalls associated with the definition of homelessness and provides some specific enumeration techniques. She explains, "Discussions of homelessness and homeless policy often involve appeals to numbers. People use estimates of the size of the homeless population and descriptions of the characteristics of homeless people to justify developing specific programs, appropriating money, and adopting public policies. Yet the numbers used are often at odds with each other, and lead to different conclusions."⁴⁷

⁴³Wright & Devine, page 363.

⁴⁴Wright & Devine, page 363.

⁴⁵Elizabeth Martin, "Assessment of S-Night Street Enumeration in the 1990 Census," *Evaluation Review*, Volume 16, No. 4, August 1992, page 418.

⁴⁶Robert W. Collin, "Homelessness in the United States: 1980-1990," *Journal of Planning Literature*, August 1992, page 28.

⁴⁷Martha Burt, *Practical Methods for Counting Homeless People: A Manual for States and Local Jurisdictions*, March 1992, page 1.

Part of the problem is that numbers come from a wide variety of data collection methods, each of which provides part but not all of the answer. If people trying to use the numbers do not understand where they come from, and what they can and cannot do, policies based on the numbers may be misguided.⁴⁸

Selecting a definition of the homeless is one of the hardest aspects of conducting any study of the homeless population. The pitfalls of definitions multiply as one moves from the core phenomenon of homelessness to the fringes.⁴⁹ Burt states that some of these definitional pitfalls can be avoided by:

1. Meeting with all interested parties during the design phase of the study.
2. Discussing all the types of people who might be considered homeless, and whom it is important to know about from a policy/planning perspective.
3. Being absolutely explicit about which components of the homeless you will attempt to count/interview, and which components you will make no attempt to interview.
4. Also make clear the components for which you will get partial information, and why it will be partial.⁵⁰

Although the federal government, through the Inter-Agency Council on the Homeless, had widespread authority to design, fund and administer programs for the homeless, numerous private foundations and community-based organizations also became increasingly involved in addressing the issue. Giving to End Homelessness lists common problems the foundations are confronted with as a result of the lack of a definitive description of the magnitude of the problem and what level of support private sources can realistically provide.

The methodology that the Fund for the Homeless used for this study involved surveying "750 foundations, including all members of the Neighborhood Funders Group, all community foundations, all foundations categorized as funding homelessness and housing-related projects...and all those foundations represented at a 1991 National Council on Foundations workshop on homelessness. Personal and telephone interviews with thirty-five responding

⁴⁸Burt, page 1.

⁴⁹Burt, page 3.

⁵⁰Burt, page 5.

foundations took place. Four focus groups with homeless and formerly homeless persons also were held."⁵¹

This study's finding indicated that "Where homelessness is concerned, probably the most obvious correlative in terms of federal policy has been the decrease in federal spending on low-income housing programs during the Reagan-Bush years."⁵² The author concludes that "...it became clear that most respondents (foundations) feel unequal to the task of adequately addressing homelessness in their communities, and thus unable to have more than a very limited effect...most talked about the need for government to assume its responsibility for adequately responding to homelessness."⁵³

The author outlined three major approaches that foundations take in making grants to the homeless:

"The Static Approach assumes the poor will always be with us, needing our charity, and that homelessness, presently the most visible and extreme manifestation of disadvantage, is simply a by-product of poverty at this particular time in social history. This approach results in the funding of projects and programs designed to meet immediate, emergency needs...and do little to directly address the underlying conditions that initially caused the crisis."⁵⁴

"The Attributive Approach ascribes at least some portion of the problem to the pathologies of individuals (i.e.: becoming homeless as a result of alcoholism or mental illness). This approach is reflected in the traditional language of the culture of poverty and other academic approaches that segregate people who are poor and places them in a permanent, inescapable underclass. Indeed, it is this very language and culture that has resulted in the prescription use of the term 'homeless'. Within this model, homelessness is attributed, at least in good part, to negative personal conditions such as mental illness, developmental disabilities, substance abuse, or simple laziness."⁵⁵

⁵¹Ruth Cambridge et al, *Giving to End Homelessness: A Study of the National Philanthropic Response to Homelessness*, October 1992, page xiii.

⁵²Cambridge et al, page 7.

⁵³Cambridge et al, page 21.

⁵⁴Cambridge et al, page 11.

⁵⁵Cambridge et al, page 12.

"The Systemic Approach assumes an approach rooted primarily in economic factors including housing affordability and income. Recognizing that, ultimately, the eradication of homelessness will require an overhaul in national economic, housing, family support, and health care policies, this approach assumes that system-wide reform is necessary and can best be achieved through support of advocacy and public policy initiative that direct change efforts at these policies on a national as well as a state-wide level."⁵⁶

Cambridge concludes that, "Based on surveys and conversations with philanthropists, it was clear that many funders working in the area of homelessness believed they could get the most from their grant dollars by using them to leverage fundamental systemic change. Seventy-eight percent of funders surveyed believe that, of the programs they do not currently support, advocacy, lobbying, and public policy initiatives would have the greatest impact on overall prevention of homelessness; and forty-eight percent of funders believe that, of the programs they do fund, organizing/empowerment and self-advocacy projects have a significant impact on prevention."⁵⁷

Giving to End Homelessness also contained a large amount of data and discussion concerning "empowering" homeless people to encourage self-sufficiency and self-determination. Suggestions from the homeless included:

1. More research needs to be aimed at disproving the public perception that there are significant differences between homeless and other poor people...
2. There should be more homeless people producing materials portraying the problem...
3. There should be more research about homeless people's skills and methods for surviving...⁵⁸

"In most of the studies, the definition of homelessness and its conceptualization are not sophisticated. Usually it has been assumed that if people are tattered in appearance or use a particular facility, they are homeless. Little attention has been given to the nature of a person's condition, whether he or she is temporarily displaced or has been homeless for

⁵⁶Cambridge et al, pages 12-13.

⁵⁷Cambridge et al, page 18.

⁵⁸Cambridge et al, page 29.

years, or how the person became homeless. The research on homelessness is largely theoretical...falling into one of two overlapping categories. The first includes research that focuses primarily on the attributes of the homeless, such as skid-row populations, and the second focuses on the general characteristics of a local homeless population or local services for the homeless."⁵⁹

The authors note that policy statements about who the homeless are and what their needs are must be made very judiciously.

During the last few years, a shift in the public's perception of the homeless has taken place, with homeless street people increasingly referred to in negative terms. As attention to the homeless crisis increased, more and more street people were publicly identifying themselves as being homeless and in some cases seemed to become permanent accessories in urban areas. Over time, some of the street panhandlers became very aggressive in asking for money. While citizens continued to volunteer at local soup kitchens and shelters, the public was also feeling accosted by aggressive street people asking for money. Many began to wonder if these people were just not taking part in another scam to get money by simply calling themselves homeless, when in fact they were not, or were on the street due to conditions the public no longer feels sympathetic about.

Consequently, public officials, reacting to the public pressure to do something, became increasingly angry about aggressive begging and began to study ways in which to discourage panhandling, including criminalizing certain activities. A 1994 report, No Homeless People Allowed, published by the National Law Center on Homelessness and Poverty, provides an overview of the growing trend toward "criminalization of homelessness". Clearly, the public's pendulum has begun to swing back from sympathy for the homeless to a growing number of people having negative feelings about the homeless.

In response to this shift of opinion, public officials across the country have taken an increasing number of "actions against the homeless", including:

⁵⁹Milburn & Watts, page 52.

- restrictions on begging
- restrictions on homeless persons' use of public places
- police sweeps designed to remove homeless people from specific areas
- selective enforcement of general laws against homeless people
- restrictions on providers of services to homeless people

The report also found that news accounts often erroneously attribute the increased prevalence of anti-homeless city actions to declining public sympathy for homeless people. Actually, opinion polls consistently reveal that the public supports increased government aid to help people out of homelessness.

Actions suggested in the report include⁶⁰:

1. Adopting laws designed to assist rather than harass homeless people and service providers
2. Addressing legitimate concerns through constructive rather than criminal responses
3. Fostering dialogue and outreach among homeless people, service providers, advocates and business people to find long-term solutions
4. Finding funds to implement long-term solutions

As a result of these conflicting efforts - controlling aggressive begging while continuing to help those who are truly homeless - government funding for enforcement as well as traditional social services has increased. In Philadelphia where the homeless number up to 15,000 in any given year, a \$270,000 grant from the Dept. of Justice pays for a special four-member police squad to deal with homeless people. Unit officers "go out day after day, building relationships with as many homeless people as possible - offering a ride to a shelter or social service agency." Through this project, the officers also pursue complaints filed by business people, curb aggressive panhandling and lock up those wanted for violent crimes.⁶¹

In 1992 when Bill Clinton was elected President he promised to pour federal funding and attention into eliminating homelessness. Andrew Cuomo was named a Special Assistant Secretary to the Housing and Urban Development Secretary to focus attention on

⁶⁰*Poverty & Race*, a Publication of the Poverty & Race Research Action Council, March/April 1995, pp. 19-20.

⁶¹"Coping With Homelessness", *The Flint Journal*, January 30, 1995.

homelessness and, once again, elected officials and other well-known people were sleeping outside to draw attention to the issue.

A 1993 HUD research project included a summary of the characteristics of the homeless population⁶²:

- Family Status: single, unattached adults, unaccompanied by children, make up three quarters of homeless persons. Men outnumber women by a factor of five. Families with children, more than 80% of whom are headed by a single mother, make up another fifth. The remainder are adults in couples or other groupings.
- Age: the average age of unattached homeless adults is in the late 30s; that of mothers with children is in the early 30s.
- Race and Ethnicity: Studies have shown that minorities are disproportionately represented among the homeless population, especially among homeless families.
- Institutional History: Only one in four homeless men has no history of any (kind) of institutional stay.
- Health Status: At least half of the adult homeless population has a current or past alcohol or drug use problem, and up to one-third of the population has severe mental illness.
- Income and Employment: In a national sample, the average monthly household income was less than \$200. Only half of homeless men have completed high school.
- Foster Care: A disproportionate number of adult homeless persons, ranging from 9% to 39% depending on the study, spent some time in foster care as children.
- Homeless Children: As many as one-third of homeless children may not be attending school on a regular basis and suffer from serious emotional and developmental problems that can persist long after their families find permanent housing.
- Veterans: Approximately 30% to 45% of the entire adult male homeless population have served their country in the armed services.

Following this study, a comprehensive plan was announced in 1995 and accompanied, "the largest block of funding, \$1.6 billion, tripling HUD's homeless budget over the past 2 years." This was the largest level of funding for a single competition in HUD's history, far exceeding the \$572 million awarded for homeless programs in 1994. The funding was made available

⁶²*Priority: Home! The Federal Plan to Break the Cycle of Homelessness*, Report HUD-1454-CPD, issued by the United States Department of Housing & Urban Development, March 1994, pp.23-25.

to communities to eliminate gaps in homeless services, through locally designed Continuum of Care plans.⁶³

Concurrently, Flint area service providers began to work more closely together and initiated other cooperative planning initiatives, including a 1995 Point-in-Time count to measure homelessness in Genesee County on one given day, March 13, 1995. The count showed that there were 204 homeless people in the county, 17 of whom were unsheltered. This number only included statistics from those agencies that provide overnight shelter, with some of those providers choosing not to participate. In addition, the 204 number did not include those people on the street, living in cars, in abandoned buildings, in parks, or staying with friends. Recognizing these exemptions, the report concludes the number of homeless people in the Flint area is no doubt higher than 204 (but considerably lower than the first estimates of over 4,000 people first published in 1989).⁶⁴

In 1995, the Genesee County Metropolitan Planning Commission coordinated the development of a local Homeless Continuum of Care Plan. This project includes seven agencies (Genesee County Community Mental Health, REACH, Genesee County Community Action Agency, CARE, Inc., Intake Assessment and Referral, Inc., YWCA/Transition House, YWCA SAFE House) working together to address a range of needs. The county plan was approved by HUD and resulted in a \$2,200,000 Continuum of Care grant in 1995.

Local service providers continue to meet together and, in 1996, with over 40 agencies participating, helped identify local needs and gaps in homeless services which became the foundation for the second Continuum of Care grant request submitted to the Federal Government in June 1996.

⁶³"HUD Announces the Largest Level of Homeless Funding in Its History," *Community Connections*, published by the U.S. Dept. of Housing & Urban Development, Office of Community Planning & Development, March 1995, pp. 1 & 4.

⁶⁴*Federal Register*, Vol. 61, No. 52, Friday, March 15, 1996, Continuum of Care Grant Application, pages 10866-10877.

Research Question

Key ingredients government officials need to address a community problem are an accurate description of the issue, the size of the problem and an understanding of its impact on the quality of life in a community. These basic requirements impact the amount of time and money allocated to the problem and ultimately the degree of success in dealing with it. The issue of homelessness elicits a variety of opinions about the size of the problem, who is eligible for homeless services, and how gaps in services should be addressed.

The main objective of this paper was to study the policy implications of homelessness as it relates to the statutory definition of homelessness, and how services are designed in light of the uncertainty of how many people are affected. That is, how the definition of the problem and number of people involved impacts on designing and implementing services.

The objective of the research on the definition of homelessness was to determine whether the Stewart B. McKinney Act (federal funding targeted for homelessness) was meeting the needs of people who are homeless in Genesee County. Data were collected and evaluated to compare how the Act's statutory definition of homelessness relates to the local operational definition. The issues were measured by comparing the eligibility guidelines as provided by agencies involved directly or indirectly with the homeless to the statutory definition of homelessness as found in the McKinney legislation. The research and data would indicate if the McKinney Act's funding is, in fact, serving the homeless, and how the operational and statutory definitions compare.

Research Methods

To organize data related to the objectives, a descriptive chart was created. Information for the chart was secured through discussions with staff of county agencies involved in providing and/or planning services for the homeless. Information obtained through these discussions included client eligibility guidelines, services provided, McKinney Act and other funding used for homeless services, and any involvement their agency had in a recent Housing and Urban Development Continuum of Care grant application that involved over forty different agencies working together to identify gaps in current homeless services. The information gathering included documentation of which agencies are actually receiving services funded through the McKinney Act and whether or not they match the statutory definition of homelessness. An examination of relevant documents, including annual reports and descriptive brochures also took place (see appendix A).

To examine the process of how homeless prevention and support services are developed, meetings with city and county officials who are responsible for program planning and implementation (Flint Department of Community Development and the Genesee County Metropolitan Planning Commission) took place.

Research Findings

To secure information concerning homeless services in Genesee County, data was collected from fifty-eight local agencies (see chart, Appendix A). Forty-four or 76% of the agencies provide direct assistance to homeless people, with the remaining fourteen or 24% involved in administrative and advocacy activities only, or have services available to all citizens including the homeless, but are not targeted specifically to their needs. Twenty-eight or 64% of the direct service providers were established or began providing homeless assistance after 1980, when homelessness began receiving national attention.

Information secured through discussions with local service providers show many different eligibility requirements for people who receive services. With the exception of a very small number of agencies, each local service provider has specific eligibility guidelines for services, such as single men, women and their children, adults with major psychotic disorders, adults receiving social security disability benefits, veterans, run-away youth, Hispanic children and adults, people who have AIDS, women who are victims of domestic violence, etc.

In discussions with service providers, only two agency representatives referred to the statutory definition of homelessness when describing their eligibility guidelines. (The statutory definition, as stated in the Stewart B. McKinley Homeless Assistance Act is "An individual or family which lacks a fixed, regular, and adequate night-time residence; or an individual or family who has a primary nighttime residence that is a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for persons with mental illness); an institution that provides a temporary residence for individuals intended to be institutionalized; or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings."¹) In response to the question of who they serve, those agencies which referred specifically to the statutory definition were the Intake, Assessment and Referral Center and the Hamilton Family Health Center.

The results of the agency discussions indicate that, while the statutory definition is very general and open-ended, it does accommodate a wide range of living conditions and needs.

¹*Housing and Development Reporter*, published by Warren Gorham Lamont, February 6, 1996, page 09:6171.

Some of the agencies involved in homeless services have very minimal eligibility requirements and, by simply declaring oneself to be homeless or in need of help, minimal support is easily available, such as meals provided by Catholic Social Services at one of their three sites, the St. Mary's and Bread of Life sandwich programs and the North End Soup Kitchen, or emergency overnight housing at the Carriage Town Mission.

Beyond these basic life-needs, local service providers, working together and individually, have become increasingly stringent in developing eligibility guidelines, carefully screening clients and often requiring documentation verifying eligibility for services. In an effort to eliminate duplication of services, a small group of primary service providers created a computerized screening process in 1996 for the purpose of tracking individuals by name and documenting services provided by the agencies involved. The intention of this project is to help the agencies become aware of those people who go from agency to agency seeking assistance who do not reveal, either intentionally or otherwise, what other service providers have already provided, or are in the process of providing.

In addition, local service providers are finding other ways to coordinate programs, exchange information, share resources and screen out troublesome clients. In 1996 over forty agencies participated in identifying unmet needs and gaps in homeless services for the purpose of applying for a second Housing and Urban Development Continuum of Care grant. This process was not without some controversy among the participants as, although it appears that the plan was endorsed by all the agencies listed as participants, several agency representatives noted concerns that the application did not, in fact, meet the primary needs of the homeless nor did it address gaps in service. Subsequently, this Continuum of Care grant request was not approved by the federal government.

It remains difficult to document the extent of homelessness in the Genesee County area and, although positive steps have begun to take place, an accurate number of homeless people in the Flint area remains an open question. In 1995 a point-in-time count took place to secure a more realistic number of homeless people in Genesee County on one given day. The count took place on March 13, 1995 and showed that there were 204 homeless people in the county, 17 of whom were unsheltered.

Although this number only includes information from those agencies that provide overnight shelter, some of the shelter providers did not participate and the count did not include those people on the street, living in cars, in abandoned buildings, in parks, or staying with friends. However, it does represent a positive effort to secure numbers based on fact rather than through a formula.

Initially, the number of homeless people in Genesee County was based on a formula developed by the Community Services Society/Institute for Social Welfare Research, a national advocacy group for the homeless in New York City. This organization estimated that one percent of the nation's population may become homeless at some time of the year. The formula was applied to the population of Genesee County, therefore resulting in the number 4,351.

Planners on the staff of the Genesee County Metropolitan Planning Commission and the City of Flint stated that, although the point-in-time number of 204 is very small as compared to the 4,351 estimate, each estimate has merit. While the lower number represents a good estimate of the truly homeless on one given night, the larger number may represent a good estimate of the number of people who are potentially homeless, are living with relatives, move frequently due to lack of permanent affordable housing, lack regular employment or have drug abuse problems, all of which result in unstable housing situations.

Locally, the average number of people receiving homeless services from individual service providers varies greatly and does not correspond to either the point-in-time count nor the larger number of potential homeless. While the point-in-time count served to provide some factual information about the size of the problem in Genesee County, it does not explain the wide range of numbers of clients local service providers report helping on an annual basis (ranging from 3 women at the Christ Episcopal Center to 1,700 adults and children receiving shelter and food at the Carriage Towne Mission).

Local government planners are aware of the very large numbers of people reported by some agencies and suggested the reason for this is that frequently the same person is counted each time they receive separate services in large agencies.

According to the Genesee County Metropolitan Planning Commission (GCMPC), progress in coordinating homeless services is taking place, especially through the Genesee County Continuum of Care Plan. This project consists of seven agencies (Genesee County Community Mental Health, REACH, Genesee County Community Action Agency, CARE, Inc., Intake Assessment and Referral, Inc., YWCA/Transition House, YWCA SAFE House) which received a total of \$2,200,000 funding in 1995. This group meets on a monthly basis to exchange information and strengthen coordination of services. The GCMPC would like to expand this planning process by working more closely with those local agencies which help the homeless but are not participating in the Continuum of Care Plan.

Working more closely with the grass-roots agencies and those involved with nontraditional programs would result in a more accurate picture of what is and what is not available. Another policy issue noted by the GCMPC includes the many varied eligibility guidelines used by agencies and how they cause gaps in services when basic requirements conflict with other service providers. For example, many agencies do not provide assistance to the mentally ill substance abuser until the client first receives substance abuse treatment. Conversely, based on State of Michigan regulations, the Genesee County Community Mental Health Department is not licensed to provide substance abuse treatment, but is required to treat people who are mentally ill, although for the dually diagnosed client it is extremely difficult to isolate one problem from the other. County planners believe a policy requiring coordination of services is needed and individual eligibility agency guidelines need to be examined and adjusted to reduce the likelihood of homeless people failing to receive assistance due to conflicting eligibility guidelines.

The explanation given for why the number of homeless people has not gone down, as funding dedicated to reducing it continues to increase, is that people who are at risk of becoming homeless are also those most hardest hit by other quality of life factors that began to take place in the 1980s. People experiencing homelessness include those who have also experienced generational poverty, have minimal education and job skills, are long-term residents of public housing, etc. This population is most affected by the reduction of subsidized housing, the loss of low-cost housing in urban areas due to urban renewal projects, the influx of crack cocaine in poor neighborhoods, domestic violence, the increase

in young unwed mothers, the reduction and/or elimination of welfare benefits, the deinstitutionalization process and the steady reduction of low-skill manufacturing jobs. All of these factors contribute to the increase of homelessness and, according to community planners, will not decrease until comprehensive supportive services, including long-term case management, is provided along with housing.

According to City of Flint officials, homelessness will not be eliminated until the root causes of it are addressed, including working with people who, because of poverty, unemployment, substance abuse and lack of independent living skills are chronically evicted from where they are living, whether renting a residence on their own or living with relatives and friends.

Conclusions

Cooperative planning is beginning to take shape among the more than fifty agencies involved in local homeless services. Although this effort is still in the early stages, and does not involve all of the agencies which identified themselves as providing services to the homeless, it is clearly a positive step.

In reviewing the agencies' very broad range of services and eligibility guidelines, coordination of services is critical. The very existence of so many agencies involved in homelessness points out the importance of cooperative programming to avoid duplication of services while addressing gaps in assistance (see chart, Appendix A). Discussions with representatives of the seven agencies brought formally together through the Genesee County Continuum of Care indicate a clearer understanding on their part of how their specific services fit into a larger plan, and when viewed together shows how a long-range plan should work. Additional planning of this kind is needed.

The actual number of people in Genesee County affected by homelessness is also becoming better understood based on annual points-in-time counts. Other counting efforts are beginning to take place, including yearly data provided by the local police departments which report the number of homeless people with whom they interact. This effort, and others like it which are designed to eliminate, or at least raise awareness of, counting the same person more than once, is beginning to show positive results. The issue of counting individuals vs. counting units of service provided to individuals explains many of the very large numbers of clients served by some agencies. This issue, units of service vs. individuals, merits further study.

When research first began concerning how the statutory definition of a homeless person compares to the definition of people actually receiving services, the anticipation was that the findings would conflict. However, the research indicates that because the statutory definition is fairly open-ended, it is comparable to the operational description. Discussions with city and county officials also confirm this conclusion. Homeless service planners are particularly concerned about long-term prevention programs and the importance of supportive services in addition to housing.

Virtually all agencies which have been successful in working with the homeless provide more than just shelter. Emergency housing may be adequate for those individuals who are homeless due to a catastrophic event such as a fire or a sudden unexpected loss of income. Housing alone does not meet the needs of the chronically homeless, many of whom are also substance abusers, are mentally ill, have a serious lack of independent living skills, have experienced generational poverty, have few job skills, minimal education, etc. To reduce the number of homeless people who also have complex emotional and physical needs requires long-term supportive services and case management. Providing emergency shelter alone resolves the immediate housing problem only and does very little to address ongoing needs that, left unattended, result in people becoming homeless again.

Continued efforts in expanding upon the Genesee County Continuum of Care project are important. This project provides a solid foundation, and it also helps service providers identify and reach the most needy while using limited funds appropriately. Expanding the plan can provide all interested parties with a clearer understanding of what is presently provided, what is still needed, and where and how new initiatives should or should not be created.

Homeless service planning must also include all agencies: the small grass-roots projects, those which are religious-based, and those which have worked with the homeless for years, such as the Salvation Army and the Carriage Town Mission. While some of the newer organizations do not fit into the traditional social service environment, they do provide services, limited as they may be. It is important that in policymaking, planners have a firm grasp of what is available, thereby being able to guide or even discourage the development of new programs. Homeless service planners appear to be taking steps to improve cooperative and collaborative programming and, therefore, the awareness of specific needs and how to best address those needs is improving. This is also true for identifying the number of people affected by homelessness and, as a result, service needs are becoming more clearly understood and addressed.

Data Collection

In order to ease review of current local homeless services, funding, client eligibility guidelines, and number of clients served per agency, program data was collected and organized. Information was secured through discussions with agency representatives and through a review of agency brochures, annual reports, and Housing and Urban Development Continuum of Care grant proposals. Once collected, the data was placed in a descriptive chart, which facilitated comparative study and provided a general overview of available services (see Appendix A).

Information concerning public policy implications was secured through discussions with officials with the Genesee County Metropolitan Planning Commission and the City of Flint Department of Community and Economic Development. An examination of relevant documents, including annual planning reports, also took place.

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Genesee County Homeless Services Appendix A

Agency	Contact	Est'd	Client Eligibility	Current Homeless Services Provided	Annual Number Homeless People Served	FY 96 McKinney Homeless Funding	Other Funding for Homeless Services	Continuum of Care Involvement (2nd Plan)	Number of People to be Served thru CoC
Affordable Living Services P.O. Box 3594 Flint, MI 48502	Patrick Beal 810-238-2970	1995	low-income individuals, primarily people with mental health disabilities	information and assistance in finding and securing affordable housing	none yet, grass-roots group, just getting organized	0	0	\$99,288 HUD SHIP In conjunction with the VISTA Center, develop congregate housing for mentally and physically disabled adults	770
American Red Cross Genesee-Lapeer Chapter 1401 S Grand Traverse Flint, MI 48503	Fran Hitesheiw 810-232-1401 810-232-8670 fax	1914	temporary homeless due to a catastrophic event	emergency housing, food, transportation and utility payments	381	0	National Red Cross Disaster Funds United Way Family Indep. Agency	participated in the development of plan	0

Agency	Contact	Est'd	Client Eligibility	Current Homeless Services Provided	Annual Number Homeless People Served	FY 96 McKinney Homeless Funding	Other Funding for Homeless Services	Continuum of Care Involvement (2nd Plan)	Number of People to be Served thru CoC
Carriage Towne Mission 605 Garland Street Flint, MI 48503	Ron Koland 810-233-8787 810-233-4863 fax	1950	single adult men	emergency housing, adult ed and GED classes, computer-aided learning ctr, clothing, medical assistance, substance abuse counseling	760	0	comm donations GC CDBG EHP (for emerg housing needs of Salvation Army clients)	participated in the development of plan	0
Carriage Town Family Ctr 607 Garland Street Flint, MI 48503	Ron Koland 810-238-6826 810-233-4863 fax	1992	single adult women and their children	6 week trans and emerg housing, adult ed, life skills, parenting classes, medical and nutritional assistance, referrals, substance abuse counseling, transportation	1,700 (792 women, 993 young children - 90% are unmarried women with children fleeing from violence)	0	comm donations GC CDBG EHP (for emerg housing needs of Salvation Army clients)	participated in the development of plan	0

Agency	Contact	Est'd	Client Eligibility	Current Homeless Services Provided	Annual Number Homeless People Served	FY 96 McKinney Homeless Funding	Other Funding for Homeless Services	Continuum of Care Involvement (2nd Plan)	Number of People to be Served thru CoC
Catholic Social Services of Flint								participated in the development of plan	0
St Mary's Sandwich Prog 2608 Maplewood Flint, MI	John K. Manse 810-233-3843	1988	adults	walk-up facility that distributes free sandwiches and fruit	175	\$3,000 (fresh fruit, shared with Holy Angels Program)	private donations		
Bread of Life Sandwich Prog 1101 Chippewa Flint, MI 48503	John K. Manse 810-767-5789	1940	adults	free sandwiches and fruit	175	see above	private donations		
North End Soup Kitchen 735 East Stewart Flint, MI 48505	John K. Manse 810-785-6911	1982	adults and children, must sign-in and if with children, must indicate number	hot meals adult education	225 people/day 60,000 meals/yr	\$5,000 (food) \$4,770 (utilities, security, water, trash removal)	CDBG private donations		
Personal Needs Bank 735 East Stewart Flint, MI 48505	John K. Manse 810-785-6911	1989	must prove poverty level income eligible to receive supplies once/month	personal care items	648 families 461 individ	\$6,000 (supplies)	private donations supplies provided by Food Bank		

Agency	Contact	Est'd	Client Eligibility	Current Homeless Services Provided	Annual Number Homeless People Served	FY 96 McKinney Homeless Funding	Other Funding for Homeless Services	Continuum of Care Involvement (2nd Plan)	Number of People to be Served thru CoC
Christ Episcopal Center 322 East Hamilton Flint, MI 48504	Capt. Wayne Larson 810-239-9425 810-239-9603 fax	1988	homeless women who have been referred by Carriage Town Ministry	transitional housing in former rectory	3	0	St. Paul's Episcopal Church	none	0
City of Flint Dept of Human Services* 1101 South Saginaw Street Flint, MI 48502 *formerly Mayor's Office on Aging & Handicapped	Sondra Rawls 810-766-7276 810-766-7218 fax	1976 (current city charter adopted)	n/a	founded and administers VISTA Center	0	0	See VISTA Center	participated in the development of plan	0
City of Flint Mayor's Office 1101 South Saginaw Street Flint, MI 48502	Eddie McGhee 810-766-7345 810-766-7218 fax	1974 (current city charter adopted)	n/a	n/a	n/a	0	0	participated in the development of plan	0
City of Flint Human Relations Commission 1101 South Saginaw Street Flint, MI 48502	Cleora McGhee 810-766-7430 810-234-8460 fax	1957	n/a	Provides seminars at homeless shelters and other relevant agencies on finding, securing and maintaining housing	50	0	CDBG \$60,000 Fair Housing Project	coordinated meetings, planning process and submission of plan to HUD	0

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City of Flint Police Department 210 East Fifth Street Flint, MI 48502	Chief Trevor Hampton 810-766-7313 810-766-7105 fax	1974 (current city charter adopted)	n/a	none	n/a	0	0	participated in the development of plan	0
City of Flint Department of Community & Economic Development 1101 South Saginaw Street Flint, MI 48502	Suzanne Wilcox 810-766-7436 810-766-7351 fax	1974 (new city charter adopted)	n/a	administers and distributes city portion of McKinney Homeless Funding	n/a	\$5,512 (program admin)	0	coordinated meetings, planning process and submission of plan to HUD	0
Committee Concerned with Housing c/o Emergency Shelter for Women and Children 1917 Delaware Avenue Flint, MI 48506	Pat Motter 810-233-0689 810-233-0850 fax	1987	an advocacy committee whose membership includes representatives of profit and nonprofit organizations and business concerned with local neighborhood and housing issues	advocacy for neighborhood and housing issues, subcommittee focuses on issue of homelessness	n/a	0	0	participated in the development of plan	0

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Community Coordinated Child Care 310 East Third Street Flint, MI 48502	Jan Nieuwenhuis 810-232-0145 810-232-6261 fax	1970	none, services available to all	provide child care info and referral assistance to clients of the Emergency Shelter for Women and YWCA Safe House	35	0	CDBG \$10,000 emerg child care scholarships FIA United Way	participated in the development of plan	0
Community Capital Development Corp. 711 North Saginaw Street Suite 123 Flint, MI 48503	Harry Blecker 810-239-5847 810-239-5575 fax	1971	people with low incomes (they do not currently serve any homeless people, which staff defines as people living in a shelter	homeless prevention programs: low income renter and home owner housing rehab services	0	0	CDBG \$220,000 HOME \$362,500 MSHDA	\$210,000 PILOT Program: in conj with The Disability Network, purchase land and build barrier-free housing for disabled individuals to purchase and establish a homeowner association to assist with maintaining property.	20

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Community Alliance Resource Environment (CARE) G-5171 North Saginaw St. Flint, MI 48505	Agnes Napier 810-787-1939 810-787-2183 fax	1989	low income adults with substance abuse problems	Vera B. Rison Center provides housing for homeless chronic substance abusers and mentally ill women. Golden House serves men with no housing, mentally disabled, chemically dependent or dual diagnosed individuals.	18	0	HUD \$369,600 GCCoC project: trans housing HOME CHDO Shelter Plus Care	\$694,750 Safe Haven, a project for mentally ill substance abusers who may or may not commit to treatment and who are denied access to other programs due to disruptive behavior	4950

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Connexion 752 East Hamilton Flint, MI 48504	Colleen Johnson 810-767-3750 810-767-8547 fax	1978	established by agencies where programs take place	provides substance abuse prevention and life skills programs for residents of shelters for the homeless agencies (currently Harvest House, YWCA Safe House and Emergency Shelter for Women)	150	0	United Way	participated in the development of plan	0
Court Street Village Nonprofit Housing Corp. 700 East Court Street Flint, MI 48503	Michael Freeman 810-767-0603 810-767-0636 fax	1989	for housing adults over the age of 55 and for housing rehab program, low to moderate income adults residing in Central Park or Carriage Towne neighborhoods	low-income housing for older adults and housing rehab program for low to moderate income adults and families	0	0	CDBG \$120,000 housing rehab LISC MSHDA Foundation Grants	participated in the development of plan	0

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Crossover 414 West Court Street Flint, MI 48503	Lynn Cavett 810-234-2479	1991	clients interviewed and referred by Love, Inc.	helping the homeless and poor throughout Genesee County by ministering to their material (clothing, food, personal needs, housewares, job training, parenting, nutrition, house-keeping, education, employment) and spiritual needs	3070	0	down-town churches, local businesses and individ	none	0
Family Service Agency 202 East Boulevard Drive Flint, MI 48503	Charles Tommasulo 810-767-4014 810-767-0020 fax	1945	emotionally and physically disabled adults who are receiving social security disability benefits who are residents of Genesee County and are referred by Probate Court	guardianship and payee representative	453	0	United Way FIA Private Donations	payee and life skills support for Community Mental Health clients who are at risk of becoming homeless	50

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Flint Housing Commission 3820 Richfield Road Flint, MI 48506	Jennifer Harris 810-736-3050 810-736-0158 fax	1974 (new city charter adopted)	low income older adults, families and disabled adults	if a person is homeless or is paying over 50% of their monthly income for rent and utilities, they receive preference for available federally subsidized apartments or section 8 independent housing units	20	0	0	participated in the development plan	0
Flint Odyssey House 1225 Martin Luther King Flint, MI 48503	Jon Manning 810-238-0483 810-238-1322 fax	1972	low income adults with substance abuse and mental health problems	substance abuse treatment, funds for homeowners to rehabilitate their homes	100	0	HUD \$325,505 5 year housing rehab grant HOME \$150,000 housing rehab	FOHI \$254,413 permanent housing program with support services for disabled adults and their children	24

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Flint Neighborhood Improvement and Preservation Project 505 Court Street Flint, MI 48503	Kathy Bagley 810-766-7212 810-232-9834 fax	1977	low income and disabled homeowners	minor home and handicap accessibility rehabilitation services	0	0	CDBG \$500,000 housing rehab	participated in the development of plan	0
Food Bank of Eastern Michigan 2310 Lapeer Road Flint, MI 48503	Melissa Craig 810-239-4441 810-239-4498 fax	1981	must be a nonprofit 501(c)3 agency that distributes food free to the needy, must have a clean storage area and, if food is prepared and served, must meet public health requirements	emergency food	33 agencies	\$1,000 earmarked for YWCA Safehouse \$18,958 earmarked for agencies to use when purchasing food from the Food Bank	CDBG \$15,000 for storage racks CDBG \$20,000 for agencies to use when purchasing food from the Food Bank	participated in the development of plan	0
Genesee County Family Independence Agency 125 East Union Street Flint, MI 48502 (formerly Dept. of Social Services)	Howard Bearup 810-760-7342 810-760-2984 fax	1839 home-less services began in 1986	people w/o permanent housing for up to 90 days and are food stamp eligible	food stamps that can be used to pay for meals at local participating restaurants	number unavailable	0	State of Mich Emerg Relief Funds \$200,000 distributed to homeless through 8 local agencies	participated in the development of plan	0

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Genesee County Community Action Agency 631 Beach Street Flint, MI 48502	Steven Walker 810-232-2185 810-233-0850 fax	1965	adults with documented sudden loss of income	clothing, food, medical assistance, nutrition, rent/security deposits, transportation	30	8800		participated in the development of plan	0
			homeless women and children	vouchers for emergency housing at Shelter of Flint			GC CDBG EHP		
			any homeless person or agency working with the homeless	outreach to homeless people, caseworker with van and driver goes to where a homeless person is, evaluates and takes person to proper service provider	new program developed by GCCoC project, numbers not yet available		HUD \$420,472 GCCoC project: first point of contact, outreach and transportation		

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Genesee County Board of Commissioners 1101 South Beach Street Flint, MI 48502	Dan Harrell 810-257-3020 810-257-3008 fax	1836	n/a	provides county funding to Veterans Affairs, Public Health and Community Action Agency	n/a	n/a	n/a	participated in the development of plan	0
Genesee County Veterans Affairs 1101 South Beach Street Flint, MI 48502	Jean Thick 810-257-3068 810-257-3380 fax	1967	war-time veterans of military service	emergency housing, food, rent, mortgage payments	200	0	Genesee County Soldiers Relief Fund and State of Michigan Veterans Trust Fund	participated in the development of plan	0

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Genesee County Community Mental Health Homeless Outreach Project 420 West Fifth Avenue Flint, MI 48503	Stuart Trosch 810-257-3683 810-257-3712 fax	1987	homeless adults with major mental psychotic disorders	outreach, transitional, supportive housing, counseling support and information & referral	85 (full array of services) 45 (i & r)	PATH \$65,000	HUD \$250,000 CMH thru DMH HUD \$756,851 GCCoC project: trans boarding house	participated in the development of plan	0
Genesee County Sheriff 1002 South Saginaw Street Flint, MI 48502	Sheriff Joe Wilson 810-257-3406	1836	n/a	none	0	0	0	participated in the development of plan	0
Genesee County Health Department 630 South Saginaw Street Flint, MI 48502	June Taylor 810-257-3141 810-257-3147 fax	1923 (home less pro- gram est 1985)	residents of the Emergency Shelter for Women, Safe House, Harvest House, Carriage Towne Mission, Reach, and Salvation Army	in conjunction with the Hamilton Family Health Clinic, provides health screening and services to residents of homeless shelters	see Hamilton Family Health Clinic	0	0	participated in the development of plan	0

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Genesee County Substance Abuse Services 1001 South Saginaw Street Flint, MI 48502	Phillip Mosby 810-257-3201 810-257-1041 fax	1970	n/a	funds substance abuse programs at agencies serving the homeless	0	0	0	participated in the development of plan	0
Genesee County Metropolitan Planning Commission 1001 South Saginaw Street Flint, MI 48502	Julie Hinterman 810-257-3185 810-257-3185 fax	1963	n/a	distributes and administers county portion of McKinney Homeless funding	0	0	0	participated in the development of plan	0
Hamilton Family Health Center 4001 North Saginaw Street Flint, MI 48505	Eloise Leonard 810-789-9141 810-789-2130 fax	1984 home-less services started in 1989	based on federal definition of homelessness, also adults who are residents of local shelters, referrals from FIA	medical mobile team outreach to shelters - physical, mental, substance abuse, and dental screening services and referrals	1250	0	HHS \$198,000 medical mobile team outreach	participated in the development of plan	0

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Harvest House Shelter 101 North Grand Traverse Flint, MI 48503	Linda Blue 810-233-6848 810-233-4017 fax	1988	homeless and battered women and their minor children	Christian-based long-term (6 months) housing, life skills classes and emergency food for nonresidents of shelter	400 based on est of 100 residents and emergency food for 300 non-residents	0	individual donations from the public	none	0
Homeless Empowerment Registry Organization 211 West Kearsley Street Flint, MI 48502	Shelly Hampton 810-239-3089 810-232-0356	1992	homeless adults who are residents or clients of local shelters	develop individual strengths and potential of homeless persons through one-on-one mentoring partnerships	10	0	Come-dian Louie Anderson services and staff Kellogg Found Whiting Found NBD ABC TV 12	participated in the development of plan	0

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Hurley Medical Center One Hurley Plaza Flint, MI 48503	Duane Parker 810-257-9614 810-762-6014 fax	1907	very low income and homeless adults experiencing acute care substance abuse problems	acute care detoxification, hospital based and out-patient substance abuse treatment, physical health emergency needs, discharge planning and referrals to community agencies	information not available	0	0	participated in the development of plan	0
Intake, Assessment and Referral Center 202 East Boulevard Drive Flint, MI 48503	Christina Croteau 810-235-9555 810-235-9525 fax	1971	adults who are homeless based on federal guidelines. client self-referral and from agencies, courts, hospitals	evaluates client substance abuse problems, then refers to appropriate treatment program, case management during and following treatment	180 (based on actual count of 15 people served in Nov 1996)	0	HUD \$118,220 GCCoC project: support services	participated in the development of plan	0

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Legal Services of Eastern Michigan 547 South Saginaw Street Flint, MI 48502	Edward J. Hoort 810-234-2621 810-234-9039 fax	1974	low income adults and families	legal assistance	5,483 (low income adults)	0	LSC CDBG United Way VAAA	\$112,526 Income, Education, and Medical Independence Prog. Direct legal services to homeless adults and children and legal support to non-profit agencies serving the same.	495
I.O.V.E., Inc. 202 East Boulevard Drive Flint, MI 48503	Beverly Ringle 810-235-4990	1981	individuals in need	personal needs, clothing, emergency food, diapers, household, seasonal services, transportation, financial	4,194 families	0	member churches	none	0

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New Flint Neighborhoods 2514 Mt. Elliott Flint, MI 48504	Hazel Yearby 810-239-4150 810-239-4150 fax	1989	homeless families needing security deposits/first month's rent and utility assistance	permanent housing, adult education and GED classes, assistance with income support, child care, clothing, dental care, emergency food, furniture, medical assistance, mental health counseling nutrition referrals, rent/security deposits, substance abuse treatment, substance abuse counseling, transporta- tion, vocational preparation	15	\$2,500 first month's rent or security deposit, utility payments	HUD/ SHP	\$247,800 POCKETS Two housing caseworkers, increase housing counseling and placement assistance	205

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Oak Street Free Methodist Mission 718 Oak Street Flint, MI 48503	Reverend Robert Hart 810-233-8945		Unable to secure further information						
Runaway Emergency Action Center Hotline (REACH) 914 Church Street Flint, MI 48502	Bob Edgar 810-233-8700 810-233-0263 fax	1977	run-away youth ages 10-17	crisis intervention counseling, temporary shelter (up to 14 days)	290	\$13,732 utilities, maint, rent, insurance, printing, furnishings	HUD \$427,471 GCCoC project: trans housing HOME \$52,000 trans rental CDBG \$25,000 rehab and operate a trans housing facility	participated in the development of plan	0

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Salvation Army 211 West Kearsley Flint, MI 48506	Douglas Speck 810-232-2196 810-234-2678 fax	1983	families at risk of becoming homeless	first month's rent, security deposits, rent payments to avoid eviction, mortgage payments to prevent foreclosure, utility payments to prevent termination of services	77	\$13,142 emergency rental, mortgage and utilities payment program	0	participated in the development of plan	0

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Shelter of Flint Emergency Shelter for Women and Children 1917 Delaware Avenue Flint, MI 48506	Pat Motter 810-233-0689 810-233-0850 fax	1984	single women with or without children, two- parent households, single parent men	24 hour bed capacity of 36 with 30 day stay, family and adult counseling, family advocacy, educational support, children's programming on-site, medical screening, community referrals	1,500 (for all 4 programs)	\$24,035 security deposits, utilities payments, staff, insurance, utilities, maint- enance, furnish- ings, food	CDBG \$70,000 personnel & ops Local found- ations and indiv- iduals	participated in the development of plan	0
Shelter of Flint Independent Transitional Housing Asylum Street Flint, MI 48503	Pat Motter	1995	families making the transition from a shelter to independent living	eight rental units for families making the transition from a shelter to independent living					

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Shelter of Flint Hospitality House 524 West Pierson Road Flint, MI 48505	Pat Motter 810-789-4235	1995	single women with or without children	transitional housing program with a bed capacity of 24, with 6-24 months stay, substance abuse and domestic violence counseling, outreach, employment assistance, job readiness skills and career planning, computer training, adult literacy, life skills training					

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Shelter of Flint Outreach Program 1917 Delaware Avenue Flint, MI 48506	Pat Motter	1995	former homeless Shelter of Flint clients	housing search assistance, home visit/follow-up support to former clients					
Spanish Speaking Information Center 202 East Boulevard Drive Flint, MI 48503	Maggie Pena 810-239-4417 810-239-4419 fax	1970	Low income Hispanic families	clothing, emergency food, rent/security deposits, utility payments	240	0	CDBG \$25,000	participated in the development of plan	0

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The Disability Network 877 East Fifth Avenue Flint, MI 48503	Michael Zelley 810-239-7634 810-239-7661 fax	1992	people who are disabled, regardless of type	information and referral and peer support, currently no specific homeless services provided	1,200 total general clients served	0	CDBG \$100,000 provided to Comm. Capital Develop. Corp. to build two permanent accessible housing units. Mich Jobs Comm grant to help disabled learn skills needed to live independently	PILOT in conjunction with the Community Capital Develop. Corp., assess and identify client need, arrange supportive services from other existing agencies, assist with mortgage application process, establish a homeowner association to assist with maintaining property.	8 families

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Transition House 927 M. L. King Avenue Flint, MI 48503	Paul Warriner 810-232-2091 810-232-2758 fax	1987	homeless, low to moderate income men, women & children	transitional housing, substance abuse counseling and treatment for alcoholics	400	0	CDBG \$27,000 passenger van	participated in the development of plan	0
United Way of Genesee and Lapeer Counties 202 East Boulevard Drive Flint, MI 48503	Sybil Atwood 810-232-8121 810-232-2898 fax	1922	n/a	Administers fundraising and fund distribution to United Way agencies, also provides information and referral assistance	0	0	0	none	n/a

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VISTA Center 877 E. Fifth Ave., Bldg. D Flint, MI 48503	C. Patrick Beal 810-766-7085	1986	mentally ill, developmentally disabled homeless and street people	assistance with income support, clothing, educational classes, information and referral, medical assistance, mental health counseling, nutrition, rent/security deposits, trans- portation, vocational preparation	968	\$18,945 housing resource specialist, program specialist, transportation, permanent housing assistance, utilities assistance, program supplies	CDBG \$60,000 staffing, rent, utilities, supplies DMH \$63,833 staffing, consumer employment	\$298,420 Tenant-Based Rentals Assistance: Outreach to individuals not participating in existing programs, case management, day center activities, transportation, mental health counseling, home visits, job training	information not available
Wellness HIV/AIDS Services 311 East Court Street Flint, MI 48502	Rob Bader 810-232-0888 810-232-2418 fax	1986	HIV positive or friend or family of someone who is	housing assistance, food, basic needs, medical care, mental health counseling	17	0	Ryan White Health Care Act	participated in the development of plan	0

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YMCA of Flint 411 East Third Street Flint, MI 48502	810-238-7621	1914	single adult men	transitional housing	0	0	0	none	0
YWCA of Greater Flint Safe House 310 East Third Street Flint, MI 48502	Mary Ann Kettels 810-238-7621 810-238-3813 fax	1908	adult women and their children	emergency shelter, child care, clothing, emergency food, medical assistance, referrals, rent/security deposits, transportation	903	\$12,600 security deposits, food, supplies, liability insurance, vehicle insurance	HUD \$71,306 GCCoC project: child advocate	participated in the development of plan	0
YWCA of Greater Flint Transition House 310 East Third Street Flint, MI 48502	Mary Ann Kettels 810-238-7621 810-238-3813 fax	1995	adult women and their children	substance abuse treatment and transitional housing		0	HUD \$71,306 GCCoC project: child advocate	participated in the development of plan	0

KEY

CDBG	City of Flint Community Development Block Grant
CMH	Community Mental Health
DMH	Department of Mental Health
FIA	Family Independence Agency
FOHI	Flint Odyssey House, Inc. Accessible Permanent Housing Project
GCCDBG EHP	Genesee County Community Development Block Grant Emergency Housing Program
GCCoC	Genesee County Continuum of Care
GCMPC	Genesee County Metropolitan Planning Commission
HHS	Health and Human Services
HOME	Home Investment Partnerships Program
HUD	Housing and Urban Development
HUD SHP	Housing and Urban Development Supportive Housing Program
HUD S+C	Housing and Urban Development Shelter Plus Care
LSC	Legal Services Corporation
MSHDA	Michigan State Housing Development Authority
PATH	Projects for Assistance in Transition from Homelessness
PILOT	Partnership for Independent Living, Ownership, and Training
POCKETS	Transitional Housing Case Management
UW	United Way of Genesee and Lapeer Counties
VAAA	Valley Area Agency on Aging